| PATENT APPLICATION FEE DETERMINATION RECOR  |  |  |                                 |                                |                        |                                      |        |                   | Application of Docket Number |         |                     |                        |  |  |
|---|--|--|---------------------------------|--------------------------------|------------------------|--------------------------------------|--------|-------------------|------------------------------|---------|---------------------|------------------------|--|--|
| Effective October 1, 2001   |  |  |                                 |                                |                        |                                      |        |                   | 100                          | 83      | 357                 | 2                      |  |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |  |                                 |                                |                        |                                      |        | MALL E            | NTITY                        | OR      | OTHER               |                        |  |  |
| T   | OTAL CLAIMS                                    |  | 10                              |                                |                        |                                      |        | RATE              | FEE                          | 7       | RATE                | FEE                    |  |  |
| FOR   |  |  | . NUMBER FILED                  |                                | NUMBER EXTRA           |                                      |        | ASIC FEE          | 370.00                       | OR      | BASIC FEE           |                        |  |  |
| π   | TAL CHARGE                                     | / Ø minus 20=                            |                                 | . 0                            |                        |                                      | X\$ 9= |                   | OR                           |         |                     |                        |  |  |
| INE   | EPENDENT C                                     | 2_minus 3 =                              |                                 | • 4                            |                        |                                      | X42=   |                   |                              |         |                     |                        |  |  |
| ML  | ILTIPLE DEPEN                                  | NDENT CLAIM P                            | RESENT                          |                                |                        |                                      | -      |                   |                              | OR      | <b>XQ4</b> =        |                        |  |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2              |  |  |                                 |                                |                        |                                      |        | +140=             |                              | OR      | +280=               |                        |  |  |
| CLAIMS AS AMENDED - PART II   |  |  |                                 |                                |                        |                                      | •      | TOTAL             |                              | OR      | TOTAL               | 740                    |  |  |
|   |  | Column 1)                                | (Column 2) (Column 3)           |                                |                        |                                      | \$     | SMALL             | ENTITY                       | OR      | OTHER<br>SMALL I    |                        |  |  |
| AMENDMENTA  |  | CLAIMS REMAINING AFTER AMENDMENT         |                                 | HIGH<br>NUM<br>PREVIO<br>PAID  | EST<br>BER<br>DUSLY    | PRESENT<br>EXTRA                     |        | RATE              | ADDI-<br>TIONAL              |         | RATE                | ADDI-<br>TIONAL        |  |  |
|   | Total  | . 10                                     | Minus                           |                                | 0                      | • ~                                  |        | X\$ 9=            | _FEE_                        | OR      | X\$18=              | FEE                    |  |  |
|   | Independent                                    | • 2                                      | Minus                           | ***                            |                        | : —                                  |        | X42=              |                              | OR      | X84≈                |                        |  |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                                 |                                |                        |                                      |        | +140=.            |                              |         | +280=               |                        |  |  |
|   |  |  |                                 |                                |                        |                                      |        | TOTAL             |                              | OR      | TOTAL               |                        |  |  |
| /   | 17/06 (Column 1) (Column 2) (Column 3)         |  |                                 |                                |                        |                                      |        | DIT. FEE          |                              | JOR ,   | ADDIT. FEE          |                        |  |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING                      |                                 | HIGH                           | EST                    |                                      |        |                   | ADDI-                        |         |                     | ADDI-                  |  |  |
|   |  | AFTER<br>AMENDMENT                       | ,                               | PREVIO<br>PAID                 | DUSLY                  | PRESENT<br>EXTRA                     |        | RATE              | TIONAL<br>FEE                |         | RATE                | TIONAL<br>FEE          |  |  |
|   | Total  | • 6                                      | Minus                           | -                              |                        | c                                    |        | X\$ 9=            |                              | OR      | X\$18=              |                        |  |  |
|   | Independent                                    | NTATION OF MU                            | Minus                           | ENDENT                         | CH ATA                 | •                                    | F      | X42=              |                              | OR      | X84=                |                        |  |  |
|   | THOTPHEOL                                      |  | octifice del                    | ENDENT                         | CDAM                   |                                      |        | 140=              |                              | OR      | +280=               |                        |  |  |
|   |  |  |                                 |                                |                        |                                      | AD     | TOTAL<br>DIT. FEE |                              | OR      | TOTAL<br>ADDIT. FEE |                        |  |  |
| •   |  | (Column 1)                               |                                 | (Colum                         |                        | (Column 3)                           | _      |                   |                              |         |                     |                        |  |  |
| AMENDMENT C   |  | CLAIMS REMAINING AFTER AMENDMENT         |                                 | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY           | PRESENT<br>EXTRA                     |        | RATE              | ADDI-<br>TIONAL<br>FEE       |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |  |
|   | Total  | •  | Minus                           | **                             |                        | <b>=</b>                             |        | K\$ 9=            |                              | OR      | X\$18=              |                        |  |  |
|   | Independent                                    | *  | Minus                           | the                            |                        | <b>3</b> ·                           |        | X42=              |                              |         | X84=                |                        |  |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                                 |                                |                        |                                      |        |                   |                              | OR      |                     |                        |  |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |  |                                 |                                |                        |                                      |        |                   |                              | OR      | +280=               |                        |  |  |
| on  | if the "Highest Nut<br>If the "Highest Nu      | mber Previously Pa<br>mber Previously Pa | id For IN THI<br>lid For IN THI | S SPACE IS<br>S SPACE IS       | less that<br>less that | n 20, enter "20."<br>n 3, enter "3." | MA     | SIT. FEE          |                              |         | TOTAL<br>ODIT, FEE  |                        |  |  |
| •   | The 'Highest Num                               | iber Previously Paid                     | for (Total or                   | rindepende                     | ent) is the            | highest number                       | found  | in the app        | ropriate box                 | in colu | <i>m</i> n 1.       |                        |  |  |